



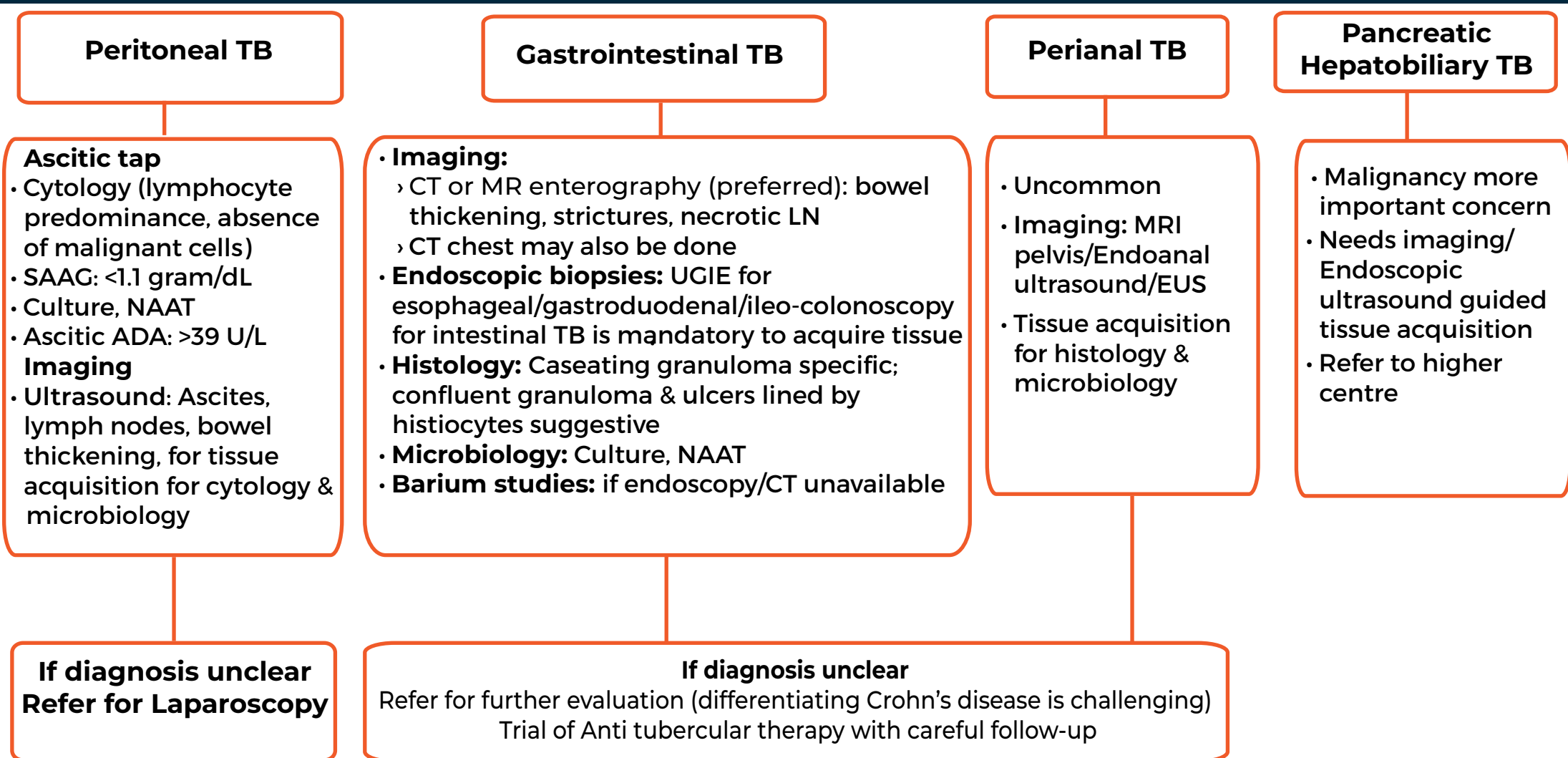
# Standard Treatment Workflow (STW) for the Management of ADULT ABDOMINAL TUBERCULOSIS ICD-10-A18.3

## WHEN TO SUSPECT

Any organ in abdominal cavity, including gut lumen & peritoneum may be affected

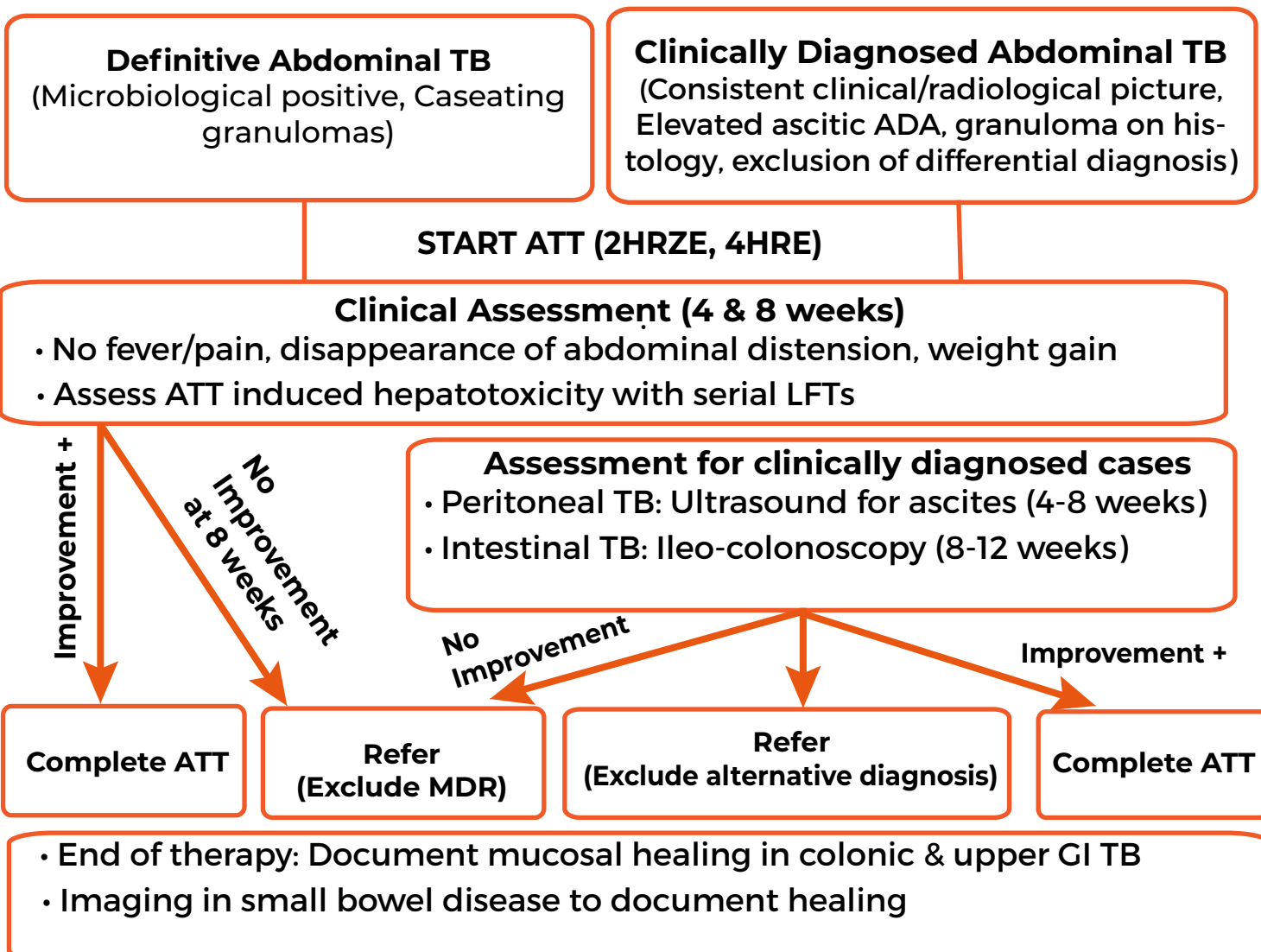
PERITONEAL	INTESTINAL	ESOPHAGEAL	GASTRO-DUODENAL	PERIANAL	PANCREATIC	HEPATO-BILIARY
<ul style="list-style-type: none"> <li>Abdominal distension</li> <li>Pain abdomen</li> <li>Fever</li> </ul>	<ul style="list-style-type: none"> <li>Recurrent intestinal colic</li> <li>Partial/ incomplete intestinal obstruction</li> <li>Chronic diarrhoea</li> <li>Weight loss</li> <li>Palpable mass abdomen</li> <li>Lower gastrointestinal bleeding</li> </ul>	<ul style="list-style-type: none"> <li>Dysphagia</li> <li>Odynophagia</li> <li>Hematemesis</li> <li>Constitutional symptoms</li> </ul>	<ul style="list-style-type: none"> <li>Gastric outlet obstruction</li> <li>Gastrointestinal bleed</li> </ul>	<ul style="list-style-type: none"> <li>Simple/ Complex peri-anal fistula</li> <li>Persistent discharge</li> <li>Fistulae which recur after multiple surgeries</li> </ul>	<ul style="list-style-type: none"> <li>Abdominal pain</li> <li>Obstructive jaundice</li> <li>Dilated pancreatic or bile duct with (peri)-pancreatic mass or cyst</li> <li>Constitutional symptoms</li> </ul>	<ul style="list-style-type: none"> <li>FUO</li> <li>Hepatomegaly</li> <li>Jaundice</li> <li>Elevated ALP</li> <li>SOL</li> <li>Hepatic abscess</li> </ul>

## EVALUATION FOR SUSPECTED ABDOMINAL TUBERCULOSIS



**HIV & blood sugar test should be done in all suspected patients as per NTEP guidelines**

## FOLLOW UP



## TREATMENT:

- Start treatment & follow-up as per NTEP guidelines
- 1st line treatment for adults & children with abdominal TB: 2HRZE/4HRE
- Extend duration of treatment in cases of inadequate response
- Refer for surgical management for complications [intestinal obstruction (due to strictures), perforation]. Consider endoscopic dilatation for treatment for accessible strictures
- Refer for biliary drainage in case of Jaundice due to biliary obstruction (hepatobiliary obstruction/pancreatic TB)

## ABBREVIATIONS

ADA: Adenosine Deaminase	FUO: Fever of Unknown Origin	MR: Magnetic Resonance	Rif: Rifampicin
ALP: Alkaline phosphatase	GI: Gastro-intestinal	Mtb: Mycobacterium Tuberculosis	SOL: Space occupying Lesion
ATT: Anti-Tubercular treatment	HRZE: Isoniazid; Rifampicin; Pyrazinamide; Ethambutol	NAAT: Nucleic Acid Amplification Test	SAAG: Serum Ascites Albumin Gradient
CT: Computed Tomography	LFT: Liver function tests	NTEP: National TB Elimination Programme	UGIE: Upper gastrointestinal endoscopy
EUS: Endoscopic ultrasound	MDR: Multi-drug resistance		

## REFERENCES

- National TB Elimination Programme, Central TB Division. Training Modules for Programme Managers & Medical Officers. Ministry of Health & Family Welfare, Government of India. <https://tb-cindia.gov.in/index1.php?lang=1&level=1&sublinkid=5465&lid=3540> Last access on 08 March, 2022.
- Guidelines for programmatic management of drug resistant tuberculosis in India March 2021. National TB Elimination Programme, Central TB Division, Ministry of Health & Family Welfare, Government of India accessed at <https://tbcindia.gov.in/showfile.php?lid=3590> Last access on 08 March, 2022.